

National Infant Immunization Week

Sample Talking Points

- Vaccines are among the 20th Century's most successful and cost-effective public health tools available for preventing disease and death. They not only prevent a vaccinated individual from developing a potentially serious disease, but they also help protect the entire community by reducing the spread of infectious agents.
- Outstanding progress has been made in immunization rates for children younger than two years old. National immunization levels are high or near record highs for most vaccines. For example, rates for measles, Hib, and three doses of diphtheria-tetanus-acellular pertussis (DTaP) are greater than 90 percent. These high immunization coverage levels translate into record or near record low levels of vaccine-preventable diseases. Morbidity for most vaccine preventable diseases has been reduced by 99 percent or more since the introduction of vaccines.
- We cannot rest upon our accomplishments. More than 900,000 US children still are not adequately immunized and we must begin anew each day as 11,000 more children are born each day that we must protect.
- Disease causing viruses and bacteria are still circulating--- either at low levels in the United States or elsewhere in the world. Those not circulating in this country are only a plane ride away. For example, each year the United States is hit with multiple importations of measles. Measles is no longer circulating in the United States, but the virus is frequently imported from outside this country. If we let our guard down and vaccination coverage levels drop, we will see a resurgence of measles. For example, in 1989, the United States was hit with a measles epidemic resulting in 55,000 cases of measles, 11,000 hospitalizations, and more than 120 deaths between 1989 and 1991.
- Today there are far fewer visible reminders of the unnecessary suffering, injuries, and premature deaths caused by vaccine-preventable diseases.
 - Polio vaccine was licensed in the United States in 1955. During 1951 to 1954, an average of 16,316 paralytic polio cases and 1,879 deaths from polio were reported each year. As of 1991, polio caused by wild-type viruses has been eliminated from the Western Hemisphere, and we are on course to eradicating polio from the world--- hopefully by the end of the year 2000.
 - A physician entering practice today will most likely never see a case of Hib meningitis. Before the introduction of effective vaccines, approximately one in 200 children developed invasive Hib disease before five years of age -- about 20,000 cases annually. Hib was the leading cause of bacterial meningitis in children under age five accounting for 50 to 65 percent of all

cases. From 15 to 30 percent of affected children became hearing impaired and 2 to 5 percent died in spite of effective antibiotic therapy.

- In the 1960s, many people witnessed, the terrible effects of the rubella virus. During an epidemic between 1964 and 1965, about 20,000 infants were born with deafness, blindness, heart disease, mental retardation, and other birth defects because the rubella virus infected their pregnant mothers. Today, thanks to an effective vaccine, the rubella virus poses little threat to expectant mothers and their children.
- As parents we want basic things for our children. We want them to grow up knowing that they are loved. We want to provide them with opportunities in life to reach their fullest potential. And we want them to be healthy and happy. There are many things parents want to give their children. But good health is perhaps the greatest gift. Vaccination is one of the most important ways a parent can protect their child's health.
- Parents and caregivers should take responsibility for their child's vaccinations. They should become informed consumers and ask questions of their health care provider. They should keep a record of each immunization visit. Even if they think their child is up-to-date, they should ask their health care provider about immunizations at every visit.
- Physicians should talk with parents about why immunization is important and be willing to answer questions about vaccines and their risks and benefits. They should use every visit as an opportunity to vaccinate and should follow-up with reminders to parents when immunizations are due.
- Vaccines not only save lives, they save money. The individual and community protection provided by vaccines help make immunization one of our most cost-effective public health strategies. All vaccines recommend for routine use are a cost savings to society when both direct and indirect costs are considered. Importantly, most vaccines are cost-saving even if only direct medical costs are considered. Our country, for example, saves \$14.50 in direct and indirect costs for every dollar invested in giving the hepatitis B vaccine to infants at birth to two months of age. Every dollar our nation spends on measles-mumps-rubella vaccine generates about \$23 in total savings--- or about \$9 billion each year.
- Public, media, and legislative attention has focused on vaccine safety. We welcome attention and interest on vaccine safety. The public should expect safe vaccines. The public is entitled to safe vaccines. We are committed to monitoring and ensuring vaccine safety. Our key vaccine safety messages include:
 - While no vaccine is 100% safe, the serious adverse events that do occur as a result of vaccination are extremely rare.

- We are committed to monitoring the serious adverse events believed to have occurred following immunization. We seek to determine whether these events are caused by the vaccines or are coincidental occurrences of rare illnesses that would have happened anyway.
- We strive to inform parents and the public about the risks and benefits of vaccines so that they have the proper basis for making immunization decisions.
- We carefully evaluate allegations of harmful vaccine effects and are prepared to adjust our policies if allegations prove scientifically valid.
- We do not minimize the pain and suffering incurred by persons who believe they have been harmed by a vaccine--- regardless of the role that vaccines may or may not have played in the illness. As public health practitioners, we also advocate research that helps us determine the true causes of very real harms that have been suffered.
- A decision to vaccinate is a decision to protect not only an individual, but the entire community as well; a decision to not vaccinate is a decision to put the community at risk. When immunization programs achieve high levels of community immunity, the likelihood that an infected person will transmit the disease to a susceptible individual is greatly reduced. This creates indirect protection. Those indirectly protected are children who may be too young for vaccination, yet still susceptible to the disease, such as children under a year-old are too young to receive the measles vaccine. Also protected are children who cannot be vaccinated for medical reasons, such as children with leukemia. In addition, some of the people protected by community immunity are people who have been vaccinated.
- Vaccinations need to occur throughout our life span--- not just in childhood. The greatest vaccine-preventable disease burden for the U.S. population today is among adults. We estimate an average 36,000 people die annually due to influenza and its complications-- most are people 65 years of age and over. Over 6,000 – 7,000 people die from pneumococcal infections annually. Hepatitis B causes another 4,000 to 5,000 adult deaths each year. We have safe, effective, but highly under-utilized vaccines that can help us reduce the \$10 billion a year in societal costs brought about by vaccine-preventable diseases in adults.